## PART B - FEE(S) TRANSMITTAL



Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

(703) 746-4000 or Fax

appropriate. All further con indicated unless corrected i maintenance fee notification	respondence including the I below or directed otherwise is.	Patent, advance ordin Block 1, by (a)	lers and notification specifying a new o	of maintenance fees v	ired). Blocks 1 through 4 swill be mailed to the current; and/or (b) indicating a sep	correspondence address as	
	E ADDRESS (Note: Legibly mark-up 590 12/23/2003	with any corrections or	use Block 1)	Fee(s) Transmittal. The papers. Each additions have its own certificat	mailing can only be used fis certificate cannot be used al paper, such as an assignme of mailing or transmission.  rtificate of Mailing or Transmis Fee(s) Transmittal is bein	for any other accompanying ent or formal drawing, must smission	
CUS	STOMER N	JMBER	I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO, on the date indicated below.				
22050				(Depositor's name)			
22850			J	(Signature)			
		-		<u> </u>		(Date)	
APPLICATION NO.	FILING DATE	F	FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.	CONFIRMATION NO.	
09/736,147	12/15/2000		Yasuo Kobayashi		200669US0DIV	9061	
APPLN. TYPE	ROCESSING METHOD AN	D APPARATUS F		XIDE FILM  UBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1330		\$300	\$1630	03/23/2004	
<u> </u>					1	03/23/2004	
EXAMINER		<del></del>	ART UNIT CLASS-SUBCLASS		J		
HASSANZADEH, PARVIZ 1763 156-345000							
CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  D "Fee Address" indication for "Fee Address" Indication form							
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)  TOKYO ELECTRON LIMITED  Tokyo, JAPAN  Please check the appropriate assignee category or categories (will not be printed on the patent);  individual  corporation or other private group entity  government							
ta. The following fee(s) are enclosed:  4b. Payment of Fee(s):							
∑ Issue Fee ☐ A check in the amount of the fee(s) is enclosed.							
<b>15</b> Publication Fee <b>15</b> Payment by credit card. Form PTO-2038 is attached.							
Advance Order - # of Copies Of Copies Advance Order - # of Copies Of Copies Advance Order - # of Copies							
Director for Patents is reque	sted to apply the Issue Fee an			any previously paid is	sue fee to the application ide	ntified above.	
NOTE; The Issue Fee and other than the applicant; interest as shown by the result of the solution of information of the solution of information of the solution of retain a benefit application. Confidentiality estimated to take 12 minut completed application for case. Any comments on suggestions for reducing the solution of the solut	Publication Fee (if require a registered attorney or age cords of the United States Partition is required by 37 CFR by the public which is to fill it is governed by 35 U.S.C. If it is governed by 35 U.S.C. Time will the amount of time your his burden, should be sent to Office, U.S. Department of END FEES OR COMPLET for Patents, Alexandria, Virg	nd) will not be accurate or the assigne- tent and Trademark  1.311. The inform le (and by the USI 22 and 37 CFR 1.1- thering, preparing, l vary depending to complete of the Chief Inform of Commerce, Al	e or other party in Office.  Atton is required to PTO to process) and This collection is and submitting the ipon the individual ethis form and/or atton Officer. U.S.	03/17/2 01 FC:1 02 FC:1	2004 MMEKONE1 00000035 501 504	9 09736147 1330.00 OP 300.00 OP	

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. TRANSMIT THIS FORM WITH FEE(S)